

Mississippi Secretary of State
700 North Street P. O. Box 136, Jackson, MS 39205-0136

ADMINISTRATIVE PROCEDURES NOTICE FILING

AGENCY NAME Division of Medicaid		CONTACT PERSON Margaret Wilson	TELEPHONE NUMBER (601) 359-5248	
ADDRESS 550 High Street, Suite 1000		CITY Jackson	STATE MS	ZIP 39201
EMAIL Margaret.Wilson@medicaid.ms.gov	SUBMIT DATE MAY 06 2015	Name or number of rule(s): Title 23: Medicaid, New Part 225: Telemedicine, New Chapter 1: Telehealth, New Rules 1.1-1.6, New Chapter 2: Remote Patient Monitoring, New Rules 2.1-2.6, New Chapter 3: Teleradiology, New Rules 3.1-3.6, New Chapter 4: Continuous Glucose Monitoring Services, New Rules 4.1-4.6.		

Short explanation of rule/amendment/repeal and reason(s) for proposing rule/amendment/repeal: This filing is to add New Part 225: Telemedicine which includes coverage language for telehealth, remote patient monitoring, teleradiology and continuous glucose monitoring services. Although Chapter 3: Teleradiology is a New Chapter, the language is struck from Part 220: Radiology and moved to the New Chapter 3 with revisions.

Specific legal authority authorizing the promulgation of rule:
Miss. Code Ann § 43-13-121, SPA 15-003.

List all rules repealed, amended, or suspended by the proposed rule: New Rules 1.1-1.6, 2.1-2.6, 3.1-3.6, 4.1-4.6.

ORAL PROCEEDING:

- ☐ An oral proceeding is scheduled for this rule on Date: _____ Time: _____ Place: _____
- ☒ Presently, an oral proceeding is not scheduled on this rule.

If an oral proceeding is not scheduled, an oral proceeding must be held if a written request for an oral proceeding is submitted by a political subdivision, an agency or ten (10) or more persons. The written request should be submitted to the agency contact person at the above address within twenty (20) days after the filing of this notice of proposed rule adoption and should include the name, address, email address, and telephone number of the person(s) making the request; and, if you are an agent or attorney, the name, address, email address, and telephone number of the party or parties you represent. At any time within the twenty-five (25) day public comment period, written submissions including arguments, data, and views on the proposed rule/amendment/repeal may be submitted to the filing agency.

ECONOMIC IMPACT STATEMENT:

- ☐ Economic impact statement not required for this rule. ☒ Concise summary of economic impact statement attached.

TEMPORARY RULES	PROPOSED ACTION ON RULES	FINAL ACTION ON RULES
_____ Original filing _____ Renewal of effectiveness To be in effect in _____ days Effective date: _____ Immediately upon filing _____ Other (specify): _____	Action proposed: _____ <input checked="" type="checkbox"/> New rule(s) _____ Amendment to existing rule(s) _____ Repeal of existing rule(s) _____ Adoption by reference Proposed final effective date: _____ 30 days after filing _____ <input checked="" type="checkbox"/> Other (specify): JUL 01 2015	Date Proposed Rule Filed: _____ Action taken: _____ Adopted with no changes in text _____ Adopted with changes _____ Adopted by reference _____ Withdrawn _____ Repeal adopted as proposed Effective date: _____ 30 days after filing _____ Other (specify): _____

Printed name and Title of person authorized to file rules: David J. Dzielak / Ph.D., Executive Director

Signature of person authorized to file rules: _____

OFFICIAL FILING STAMP	DO NOT WRITE BELOW THIS LINE OFFICIAL FILING STAMP	OFFICIAL FILING STAMP
Accepted for filing by	Accepted for filing by	Accepted for filing by

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.



DELBERT HOSEMAN
Secretary of State

CONCISE SUMMARY OF ECONOMIC IMPACT STATEMENT

An Economic Impact Statement is required for this proposed rule by Section 25-43-3.105 of the Administrative Procedures Act. This is a Concise Summary of the Economic Impact Statement which must be filed with the Secretary of State's Office.

AGENCY NAME Division of Medicaid	CONTACT PERSON Margaret Wilson		TELEPHONE NUMBER 601-359-5248
ADDRESS Walter Sillers Building, Suite 1000	CITY Jackson	STATE MS	ADDRESS Walter Sillers Building, Suite 1000
EMAIL Margaret.Wilson@medicaid.ms.gov	DESCRIPTIVE TITLE OF PROPOSED RULE Title 23: Medicaid, New Part 225: Telemedicine, New Chapter 1: Telehealth, New Rules 1.1-1.6, New Chapter 2: Remote Patient Monitoring, New Rules 2.1-2.6, New Chapter 3: Teleradiology, New Rules 3.1-3.6, New Chapter 4: Continuous Glucose Monitoring Services, New Rules 4.1-4.6.		
Specific Legal Authority Authorizing the promulgation of Rule: Miss. Code Ann § 43-13-121, SPA 15-003.		Reference to Rules repealed, amended or suspended by the Proposed Rule: New Rules 1.1-1.6, 2.1-2.6, 3.1-3.6, 4.1-4.6.	

A. Estimated Costs and Benefits

1. Briefly summarize the benefits that may result from this regulation and who will benefit:
Telemedicine will increase beneficiary access for needed Medicaid services from a remote location.
2. Briefly describe the need for the proposed rule:
Due to the rural nature of Mississippi, telemedicine will increase beneficiary access for needed Medicaid services from a remote location
3. Briefly describe the effect the proposed action will have on the public health, safety, and welfare:
Telemedicine will increase beneficiary access for needed Medicaid services from a remote location.
4. Estimated Cost of implementing proposed action:
 - a. To the agency
☐ Nothing ☐ Minimal ☐ Moderate ☐ Substantial ☐ Excessive
 - b. To other state or local government entities
☒ Nothing ☐ Minimal ☐ Moderate ☐ Substantial ☐ Excessive
5. Estimated Cost and/or economic benefit to all persons directly affected by the proposed rule:
 - a. Cost:
☐ Nothing ☒ Minimal ☐ Moderate ☐ Substantial ☐ Excessive
 - b. Economic Benefit:
☐ Nothing ☒ Minimal ☐ Moderate ☐ Substantial ☐ Excessive
6. Estimated impact on small businesses:
 - ☒ Nothing ☐ Minimal ☐ Moderate ☐ Substantial ☐ Excessive
 - a. Estimate of the number of small businesses subject to the proposed regulation:
 - b. Projected costs for small businesses to comply:
 - c. Statement of probable effect on impacted small businesses:

- d. Describe any less intrusive or less costly alternative methods of achieving the purpose of the proposed regulation including the following regulatory flexibility analysis:
- The establishment of less stringent compliance or reporting requirements for small businesses;
 - The establishment of less stringent schedules or deadlines for compliance or reporting requirements for small businesses;
 - The consolidation or simplification of compliance or reporting requirements for small businesses;
 - The establishment of performance standards for small businesses to replace design or operational standards required in the proposed regulation; and
 - The exemption of some or all small businesses from all or any part of the requirements contained in the proposed regulations: *N/A*
8. Compare the costs and benefits of the proposed rule to the probable costs and benefits of not adopting the proposed rule or significantly amending an existing rule:
9. Determine whether less costly methods or less intrusive methods exist for achieving the purpose of the proposed rule where reasonable alternative methods exist which are not precluded by law: *There are no less costly or intrusive methods for achieving the purpose of the proposed rule.*
10. Describe reasonable alternative methods, where applicable, for achieving the purpose of the proposed action which were considered by the agency: *There are no other reasonable alternative methods for achieving the purpose of the proposed rule.*
11. State reasons for rejecting alternative methods that were described in #9 above: *N/A*
12. Provide a detailed statement of the data and methodology used in making estimates required by this subsection:

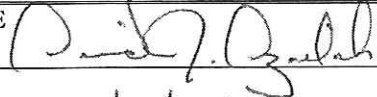
The net savings of Telemedicine Services is estimated to be \$2,604,866 per state fiscal year.

Telehealth Services: MMIS data was compiled for utilization of emergency room evaluation and management codes 99281-99285 for SFY14. Total cost of these services was \$1,557,688 with the average claim of \$77.60. Using a rate of \$31.01 for the telehealth originating site fee, the Division of Medicaid estimates a yearly decrease in emergency room costs of three percent (3%) which equals to a savings of \$46,731 annually. Additionally, the Division of Medicaid anticipates that non-emergency transportation (NET) costs will decrease due to beneficiaries accessing telehealth services at a closer geographical site to them.

Remote Patient Monitoring: A Cognos report was obtained to capture total expenditures for claims for dates of service 02/01/2014 – 02/28/2015 for beneficiaries diagnosed with one (1) or more of the chronic conditions as defined by the proposed Rule who had two (2) or more inpatient hospitalizations within the time period. There were a total of 6,189 beneficiaries with a total expenditure of \$156,000,000 averaging \$25,217.88 per beneficiary for outpatient hospital services. The maximum total cost for a beneficiary to receive Remote Patient Monitoring for a twelve (12) month period would be \$4,170.85. If three percent (3%) of the 6189 beneficiaries were to receive remote patient monitoring there is an estimated cost savings of \$3,914,742 per year.

Teleradiology: There is no economic impact because teleradiology is currently covered.

Continuous Glucose Monitoring Services: There were 12,474 Medicaid beneficiaries with Type I Diabetes Mellitus meeting the CGMS criteria for state fiscal year (SFY) 14. If the following percentages of the 12,474 beneficiaries were to receive continuous glucose monitoring services, CGMS DME and medical supplies the estimated cost would be: 1% = \$452,202.46, 3% = \$1,356,607.38, 5% = \$2,261,012.29 and 10% = \$4,522,024.58.

SIGNATURE		TITLE
DATE	5/6/15	Executive Director
		PROPOSED EFFECTIVE DATE OF RULE
		JUL 01 2015